

#### MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY **BREATH ALCOHOL PROGRAM**

**DATAMASTER MAINTENANCE REPORT** 

RECEIVED

By Carol Day at 9:03 am, Sep 24, 2013 EPORT #6

Con	nplete this report at the nplete this report when ain the original and sen	ever the instrume	nt is serviced or repair	red and whe	never it is p	iaced into servic	ays). ce.		
DATAMASTER SN NAME OF AGENCY 940234 Crocker Police Department						DATE OF INSPECTION 09/22/2013			
LOCATION OF INSTRUMENT (STREET AND CITY)  108 South Commercial Crocker MO 65452					TIME OF INSPECTION 9:43 am				
CHECKLIST: Place a mark in the box by each item if found to be satisfactory or if operating within established limits. (Write in observed values									
where determined.) Unmarked items must be corrected before using Instrument.  ✓ DIAGNOSTIC CHECK (PRINTOUT ATTACHED)  DATE AND TIME (from printout) 09/22/2013 09:43									
V	DIAGNOSTIC CHECK	(PRINTOUT ATT	ACHED)			from printout) o			
	COMPUTER			☑ DET	ECTOR				
	PROGRAM			☑ FILT	ERS		^		
	HEATERS SAMPL	E CHAMBER	<u>48</u> °C	☑ ου	ARTZ STAN	IDARD	-1100-		
	☑ FLOW DETECTOR			☑ CAI	☑ CALIBRATION				
	PUMP HIGH SPE	ED		✓ PRI	NTER				
Ø	INDICATOR LIGHTS								
Ø	SIMULATOR SOLUTION	ON SUPPLIER R	ep Co Marketing In	C	_ LOT # <u>1</u>	2002	_ EXP. DAT	E 08/29/201	4
Ø	SIMULATOR TEMP (3	34°C ± 0.2°C)	34 °C	SIMULATO	R SN	SD2729	EXP. DAT	E 08/28/201	4
$\square$	CALIBRATION CHECK	( – (ONLY ONE S	TANDARD IS TO BE	USED PER	MAINTEN	ANCE REPORT	)		
	Run three tests using a standard solution. All three tests must be within ±5% of the standard value and must have a spread of .005 or less. Mark the box corresponding to the standard solution being used. (PRINTOUT ATTACHED)								f .005 or
	0.100% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE 0.080% STANDARD - MUST READ BETWEEN 0.076% AND 0.084% INCLUSIVE 0.040% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE								
TES	ST1 ☞ .097		TEST 2 .099			TEST 3 🖛 .09	9		
PERFORM R.F.I. TEST (PRINTOUT ATTACHED)									
INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT: (DO NOT INCLUDE SELF-ADMINISTERED TESTS)									
Ì	FUSALS 0 (004	_	(.0509) 0	(.1014)	0	(.1519)	0	OVER .19	0
LIST ANY NEW PARTS AND DESCRIBE ANY ALTERATION OR MODIFICATION THAT WAS MADE TO RESTORE THE INSTRUMENT TO OPERATE SATISFACTORILY AND WITHIN ESTABLISHED LIMITS (USE OTHER SIDE IF NECESSARY).									
	,								
INSPECTING OFFICER									
SIGNATURE				Aaron J E					
	E II PERMIT NUMBER/EXPIRATION 0112	O6/12/2	2015		(573) 736				
Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office 2875 James Blvd. Poplar Bluff, MO 63901									

3101-188 STONYBROOK DRIVE RALEIGH, N.C. 27804 919-876-5480

#### CERTIFICATE OF ANALYSIS

MANUFACTURER AT	ND SUPPLIER:	RepCo Mar	keting, Inc.
LOT NUMBER: 12002			<b>O</b> ,
<b>EXPIRATION DATE:</b>	August 29, 201	4 at 11:59 p.r	n.

RepCo Marketing, Inc. certifies the following:

RepCo Marketing, Inc. manufactured, tested and supplied Lot Number 12002 of Alcohol Certified Solution for simulators. Random samples of said lot number were analyzed by an independent laboratory utilizing a gas chromatograph and found to contain \_\_\_\_\_\_ gms/dl +/-.003 gms/dl wt/vol ethanol (95% Confidence).

The alcohol and distilled water used in the solution were found to be free of any interferring substance.

This solution will produce a vapor alcohol value of <u>.100</u> +/-3% gms/210L Breath when heated to 34 Degrees Celsius +/-0.2 Degrees Celsius in a simulator (95% Confidence).

The date of manufacture for this lot number is <u>August 30, 2012</u>

The expiration date for this lot number is <u>August 29, 2014</u> at 11:59 p.m.

This document is a true representation of the original Certificate of Analysis.

Cecil B. Garner, President RepCo Marketing, Inc.

Form RM 02

#### 2208-02

### **BAC DataMaster** Evidence Ticket

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Operator Signature\_

### **BAC DataMaster** Evidence Ticket

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MOD DELEMENTER SERIES ACTUAL SERVER SACROL

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Operator Signature\_

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### **BAC DataMaster** Evidence Ticket

CROCKER POLICE REPRESENTATIVE

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Operator Signature\_



# STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES BREATH ALCOHOL PROGRAM



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# AARON J BAKER

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

## DATAMASTER

tion of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of section	e provincialis di scollo
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of expired air. Perr	0.
d from a sample of	iah 306.119 ASM
holic content of bloo	11, RSMo and 306,111 through 306,119 RSMo.
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for the detern	577.020 throu

06/12/2013 06/12/2015 230112 NUMBER \_\_ EXPIRES \_

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES Acting Director

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

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LAB-4 (A6-10)

MO 580-0771 (6-10)



# STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES **BREATH ALCOHOL PROGRAM** 



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## AARON J BAKER

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and operate the following breath analyzer(s): is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs,

## DATAMASTER

577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo. for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections

DATE NUMBER 230112 06/12/2013

06/12/2015

MO 580-0771 (6-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Dad Vactoria

Acting Director

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (H6-10)